PATIENT EDUCATION

Semaglutide for Weight Management

What it does, how to use it safely, and when to call for help

Read this before your first dose and keep it available during treatment. Your prescription label and individualized instructions control your exact dose.

What is semaglutide?

Semaglutide is a GLP-1 receptor agonist. It can reduce appetite, help you feel full sooner, and slow stomach emptying. It is used with a reduced-calorie eating plan and increased physical activity for long-term weight management in eligible patients. Results vary, and treatment works best as part of an ongoing health plan.

Who should not use it?

Do not use: Do not use semaglutide if you or a family member has had medullary thyroid carcinoma (MTC), if you have Multiple Endocrine Neoplasia syndrome type 2 (MEN 2), or if you have had a serious allergic reaction to semaglutide or one of the product ingredients.

Tell your clinician before starting if any of the following apply:

- Pregnancy, plans to become pregnant, or breastfeeding. For weight reduction, stop semaglutide when pregnancy is recognized; it should generally be stopped at least 2 months before a planned pregnancy.
- Past pancreatitis, gallstones or gallbladder disease, severe stomach-emptying problems (gastroparesis), severe gastrointestinal disease, kidney problems, or dehydration risk.
- Diabetes, use of insulin or a sulfonylurea, diabetic eye disease, or recent changes in vision.
- A planned surgery, endoscopy, colonoscopy, dental procedure, or any procedure using general anesthesia or deep sedation.
- Use of Ozempic, Rybelsus, Wegovy, another semaglutide product, tirzepatide, or any other GLP-1 medicine. These should not be combined unless specifically directed by the prescriber.

How the weekly injection is usually increased

The dose is increased gradually to reduce stomach-related side effects. Do not increase your dose unless Phoenix Clinical Services instructs you to do so.

Weeks	Weekly dose	Purpose / instruction
1-4	**0.25 mg**	Starting dose
5-8	**0.5 mg**	Increase only if tolerated and directed
9-12	**1 mg**	Increase only if tolerated and directed

Weeks	Weekly dose	Purpose / instruction
13-16	**1.7 mg**	Possible maintenance dose
17+	**1.7 or 2.4 mg**	Maintenance selected by the prescriber based on response and tolerance

If side effects are bothersome, the prescriber may hold the current dose longer, reduce the dose, or stop treatment. A higher dose is not automatically better.

Vial-and-syringe safety

> **Prevent an overdose:** Your dose must be written in milligrams (mg) and matched to the exact concentration on your pharmacy label. The number of milliliters (mL) or syringe units can change when the concentration changes. Never copy another patient's units or use an online conversion.

- Use only the vial, syringe size, and written dose supplied or approved for you.
- Before every injection, compare the medication name, concentration (mg/mL), dose (mg), volume (mL), and beyond-use date with your instructions.
- If the label, concentration, syringe, or directions look different from your last order, do not inject until the clinic or pharmacy confirms the dose.
- Never share a vial, syringe, or needle. Use a new sterile needle and syringe each time and place used supplies in an FDA-cleared sharps container.
- Follow the pharmacy label for refrigeration, storage, light protection, and discard date. Do not use medication that is cloudy, discolored, contains particles, is frozen, or is past its beyond-use date.

How to take it

- Inject under the skin once weekly on the same day, at any time of day, with or without meals.
- Use the abdomen, thigh, or upper arm and rotate injection sites. Do not inject into skin that is tender, bruised, red, hard, scarred, or infected.
- Eat smaller portions, stop when comfortably full, limit greasy or very rich foods if they worsen symptoms, and drink fluids regularly unless another clinician has restricted fluids.
- Keep your scheduled follow-ups and report your current weight, side effects, blood sugar readings if applicable, medication changes, and any planned procedures.

If you miss a weekly dose

If the next scheduled dose is more than 48 hours away, take the missed dose as soon as possible. If the next dose is less than 48 hours away, skip the missed dose and resume on your usual day. **If you miss 2 or more consecutive doses, contact Phoenix Clinical Services before restarting; a lower dose may be needed.**

Common side effects

Common effects include nausea, diarrhea, vomiting, constipation, abdominal discomfort, indigestion or heartburn, bloating, belching, gas, headache, fatigue, dizziness, and sometimes hair loss. These may be stronger after starting or increasing the dose.

Contact the clinic if symptoms are persistent, worsening, prevent you from drinking, or interfere with normal activities. Do not raise the dose while significant symptoms are present unless your prescriber specifically directs you.

Get urgent medical help

> Call 911 for trouble breathing, swelling of the face/lips/tongue/throat, fainting, or another severe allergic reaction.

- Severe, persistent abdominal pain, especially if it goes to the back, with or without vomiting (possible pancreatitis).
- Pain in the upper abdomen, fever, yellow skin/eyes, or clay-colored stools (possible gallbladder problem).
- Repeated vomiting or diarrhea, inability to keep fluids down, very little urine, severe weakness, confusion, or fainting (possible dehydration or kidney injury).
- A neck lump, persistent hoarseness, trouble swallowing, or shortness of breath.
- New or sudden vision changes, especially if you have diabetes.
- Low blood sugar symptoms such as sweating, shaking, hunger, confusion, or a fast heartbeat—especially if you use insulin or a sulfonylurea.
- A racing heartbeat at rest that does not settle.

Before surgery or sedation

Semaglutide delays stomach emptying and may increase the risk of stomach contents entering the lungs during anesthesia or deep sedation. Tell the surgeon, anesthesiologist, dentist, and procedural team that you take semaglutide. Follow their individualized instructions; do not stop or change the schedule without clinical guidance.

About compounded semaglutide

Compounded products are not FDA-approved and are not reviewed by FDA for safety, effectiveness, or quality before marketing. When a compounded product is prescribed for an individual clinical need, obtain it only from the pharmacy identified by your prescriber. FDA advises that semaglutide salt forms (semaglutide sodium or acetate) should not be used as substitutes for semaglutide base, and the safety and effectiveness of added ingredients such as B vitamins have not been established.

Questions or problems?

Contact Phoenix Clinical Services through the chat at phoenixclinicalservicesllc.com. For severe symptoms or an emergency, call 911 or go to the nearest emergency department.

Sources and important references

This material summarizes selected information and does not replace the full prescribing information, Medication Guide, pharmacy label, or individualized medical advice.

- Wegovy (semaglutide) Prescribing Information, revised June 2026: https://www.novo-pi.com/wegovy.pdf
- FDA: Concerns with unapproved GLP-1 drugs used for weight loss (updated June 2026): https://www.fda.gov/drugs/drug-alerts-and-statements/fdas-concerns-unapproved-glp-1-drugs-used-weight-loss
- FDA: Dosing errors associated with compounded injectable semaglutide: https://www.fda.gov/drugs/human-drug-compounding/fda-alerts-health-care-providers-compounders-and-patients-dosing-errors-associated-compounded
- FDA MedWatch adverse-event reporting: https://www.fda.gov/medwatch